

8017-433.CRR.gp.387170 WEMMH PTO/SB/21 (09-04)  
Approved for use through 7/31/2006. OMB 0861-0032

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

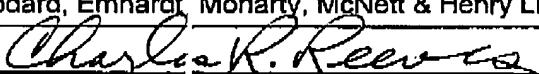
		Application Number	10/767,513
		Filing Date	January 29, 2004
		First Named Inventor	Peter K. Herman
		Art Unit	1724
		Examiner Name	Peter A. Hruskoci
Total Number of Pages in this Submission	3	Attorney Docket Number	8017-433

RECEIVED  
CENTRAL FAX CENTER  
FEB 21 2006

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached Credit Card Payment Form	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment Response 2-21-06	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Documents		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
<b>Remarks</b>		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Woodard, Emhardt, Moriarty, McNett & Henry LLP	
Signature		
Printed Name	Charles R. Reeves	
Date	February 21, 2006	Reg. No. 28,750

- I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.
- I hereby certify that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Mailing Label No. \_\_\_\_\_, on the date indicated below.
- I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (571) 273-8300 on the date indicated below.

Charles R. Reeves  
Typed/printed name of person signing this certificate

  
Signature

February 21, 2006  
Date

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of: )  
 Peter K. Herman ) Before the Examiner  
 Application No. 10/767,513 ) Peter A. Hruskoci  
 Filed January 29, 2004 )  
 LIQUID ADDITIVE SLOW- RELEASE ) Group Art Unit 1724  
 APPARATUS DRIVEN BY A FILTER )  
 PRESSURE GRADIENT )

RECEIVED  
CENTRAL FAX CENTER

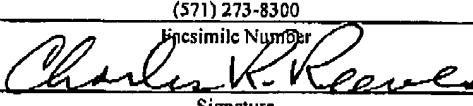
FEB 21 2006

RESPONSE TO RESTRICTION REQUIREMENT

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

## Commissioner:

In response to the Restriction Requirement imposed in the Office Action dated January 19, 2006, please enter and consider the following. No extension of time or other fees are believed to be necessary, but if any are deemed to be due, the Commissioner is authorized to charge any additional fee or credit any overcharge to Deposit Account No. 23-3030, but not to include any payment of issue fees for this case.

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:	
February 21, 2006	
Date	(571) 273-8300
Facsimile Number	
	
Signature	Charles R. Reeves
Typed or Printed Name	
February 21, 2006	
Date of Signature	

Response to Restriction Requirement  
 USSN 10/767,513  
 Group Art Unit 1724  
 CRR:pp.387161

Attorney Docket No. 8017-433

PAGE 2/3 \* RCVD AT 2/21/2006 10:20:50 AM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/29 \* DNIS:2738300 \* CSID:3176377561 \* DURATION (mm:ss):06-22